

10/536714
JC06 Rec'd CT/PTO 27 MAY 2005

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

**NATIONAL STAGE FILING OF
A PCT APPLICATION UNDER
35 U.S.C. § 371(c)**

Commissioner for Patents
P.O. Box 1450
Alexandria VA 22313-1450

INTERNATIONAL APP. NO.	PCT/AU2003/001584
INTERNATIONAL FILING DATE	November 28, 2003
PRIORITY DATE CLAIMED	November 29, 2002
FIRST NAMED INVENTOR	KRISTINE DEBRUYNE
TITLE COCHLEAR IMPLANT DRUG DELIVERY DEVICE	
ATTORNEY DOCKET NO.	COCH-0149-US1


This is an express request to begin national examination procedures under 35 U.S.C. § 371(f) of the above-identified international application in which the US has been designated. Applicants submit to the United States Designated/Elected Office (DO/EO/US) the following items and other information:

- | | |
|--|---|
| <p>1. <input checked="" type="checkbox"/> Fee Transmittal Form to submit the basic, search and examination national fee.</p> <p>2. <input type="checkbox"/> Applicant claims small entity status.</p> <p>3. <input checked="" type="checkbox"/> A copy of the International Application as filed.
[Total Pages <u>43</u>] (Specification, Claims & Abstract)
[Total Drawing Sheets <u>9</u>]</p> <p>a. <input type="checkbox"/> English Translation.</p> <p>4. <input type="checkbox"/> Oath/Declaration of the inventor(s).</p> <p>a. <input type="checkbox"/> Combined with Power of Attorney.</p> <p>5. <input type="checkbox"/> Amendments to claims of the International Application under PCT Article 19.</p> <p>a. <input type="checkbox"/> English Translation.</p> <p>6. <input type="checkbox"/> An English language translation of the annexes of the International Preliminary Examination Report under PCT Article 36.</p> <p>7. <input checked="" type="checkbox"/> Application Data Sheet.</p> <p>8. <input checked="" type="checkbox"/> Preliminary Amendment.</p> | <p>9. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (<i>Appendix</i>)</p> <p>10. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence Submission (<i>if applicable, all necessary</i>)</p> <p>a. <input type="checkbox"/> Computer Readable Form</p> <p>b. <input type="checkbox"/> Specification Sequence Listing on:</p> <p>i. <input type="checkbox"/> CD-ROM or CD-R (2 copies);</p> <p>ii. <input type="checkbox"/> Paper.</p> |
|--|---|

Accompanying Items

- | | | |
|-----|-------------------------------------|---|
| 11. | <input type="checkbox"/> | Assignment Papers (cover sheet & doc.(s)). |
| 12. | <input type="checkbox"/> | 37 CFR 3.73(b) Statement. |
| | <input type="checkbox"/> | Power of Attorney. |
| 13. | <input checked="" type="checkbox"/> | Information Disclosure Statement (IDS). |
| | <input checked="" type="checkbox"/> | Form PTO-SB-08a or PTO-SB-08b. |
| | <input checked="" type="checkbox"/> | Copy of IDS Citations. |
| 14. | <input checked="" type="checkbox"/> | Return Receipt Postcard. |
| 15. | <input type="checkbox"/> | Certified Copy of Priority Document(s). |
| | <input type="checkbox"/> | Copy of Certified Copy of Priority Document(s). |
| 16. | <input checked="" type="checkbox"/> | Copy of International Search Report. |
| 17. | <input type="checkbox"/> | Copy of International Preliminary Examination Report. |
| 18. | <input checked="" type="checkbox"/> | Copy of Written Opinion. |
| 19. | <input type="checkbox"/> | Copy of Amendments to claims of the Int'l Application under PCT Article 34. |
| 19. | <input checked="" type="checkbox"/> | Copy of published International Application. |
| 20. | <input type="checkbox"/> | Substitute Specification. |
| 21. | <input checked="" type="checkbox"/> | Other: Credit Card Payment Form |

CORRESPONDENCE ADDRESS

Customer Number:		22,506			
Name	Ajay Jagtiani			Registration No.	35,205
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Address	10363-A Democracy Lane				
City	Fairfax	State	VA	Zip	22030
Country	United States of America	Telephone	703.591.2664	Fax	703.591.5907
Signature				Date	May 27, 2005

Patent Fee Transmittal for FY 2005

☐ Applicant Claims Small Entity Status 37 C.F.R. 1.27

TOTAL AMOUNT OF PAYMENT

\$1,200.00

Application Number

Filing Date

Named Inventor

Examiner Name

Art Unit

Attorney Docket No.

To be assigned

Concurrently

Debruyne, Kristine

To be assigned

To be assigned

COCH-0149-US1

10/536714

FEE CALCULATION

1. Filing Fees

Application Type	Description	Large Entity		Small Entity		Paid
		Code	(\$)	Code	(\$)	
Utility <input type="checkbox"/>	Basic	1011	300	2011	150	\$ -
	Examination	1311	200	2311	100	\$ -
	Search	1111	500	2111	250	\$ -
Design <input type="checkbox"/>	Basic	1012	200	2012	100	\$ -
	Examination	1312	130	2312	65	\$ -
	Search	1112	100	2112	50	\$ -
Plant <input type="checkbox"/>	Basic	1013	200	2013	100	\$ -
	Examination	1313	160	2313	80	\$ -
	Search	1113	300	2113	150	\$ -
Reissue <input type="checkbox"/>	Basic	1014	300	2014	150	\$ -
	Examination	1114	600	2114	300	\$ -
	Search	1314	500	2314	250	\$ -
Provisional <input type="checkbox"/>	Basic	1005	200	2005	100	\$ -
National Stage <input checked="" type="checkbox"/>	Basic	1631	300	2631	150	\$ 300
	Examination	1633	200	2633	100	\$ 200
	Search	1632	500	2632	250	\$ 500

2. Extra Claim Fee

a. Claims as Filed

Total Claims	Extra Claims	
17	0	x
Independent		
4	1	x
Multiple Dependent		

b. Claims as Amended

Total Claims	After Amnt	Highest Paid	Present Extra	
17	17	*	0	x
Independent				
4	4	**	0	x
First Presentation of Multiple Dependent				

* Less than 20, enter 20 ** Less than 3, enter 3

3. Extra Page Fee

Total Pages	Extra Pages	
43	0	x

Subtotal for Application Fees

1 \$ 1,000 + 2 \$ 200 + 3 \$ - = \$ 1,200

4. Additional Fees

Description	Large Entity		Small Entity		Paid
	Code	(\$)	Code	(\$)	
Extension for response first month	1251	120	2251	60	\$ -
Extension for response second month	1252	450	2252	225	\$ -
Extension for response third month	1253	1,020	2253	510	\$ -
Extension for response fourth month	1254	1,590	2254	795	\$ -
Extension for response fifth month	1255	2,160	2255	1,080	\$ -
Notice of Appeal	1401	500	2401	250	\$ -
Filing a Brief in Support of an Appeal	1402	500	2402	250	\$ -
Request for Oral hearing	1403	1,000	2403	500	\$ -
Petitions under 1.17(f)	1462	400	1462	400	\$ -
Petitions under 1.17(g)	1463	200	1463	200	\$ -
Petitions under 1.17(h)	1464	130	1464	130	\$ -
Petition - public use proceeding	1451	1,510	1451	1,510	\$ -
Petition to Revive - Unavoidable	1452	500	2452	250	\$ -
Petition to Revive - Unintentional	1453	1,500	2453	750	\$ -
Utility Issue Fee	1501	1,400	2501	700	\$ -
Design Issue Fee	1502	800	2502	400	\$ -
Plant Issue Fee	1503	1,100	2503	550	\$ -
Reissue Issue Fee	1511	1,400	2511	700	\$ -
Publication Fee	1504	300	1504	300	\$ -
Statutory Disclaimer	1814	130	2814	65	\$ -

(cont.)

Description (cont.)

Description (cont.)	Large Entity		Small Entity		Paid
	Code	(\$)	Code	(\$)	
Recording each Assignment	8021	40	8021	40	\$ -
Submission of IDS	1806	180	1806	180	\$ -
Request for Cont. Examination (RCE)	1801	790	2801	395	\$ -
Filing Submission After Final	1809	790	2809	395	\$ -
Surcharge - late filing fee or oath	1051	130	2051	65	\$ -
Surcharge - late provisional fee	1052	50	2052	25	\$ -
Non-English Specification	1053	130	1053	130	\$ -
Processing Fee 37 CFR 1.17(q)	1807	50	1807	50	\$ -
Request for Ex Parte Reexamination	1812	2,520	1812	2,520	\$ -
Request Pub. of SIR prior to action	1804	920	1804	920	\$ -
Request Pub. of SIR after action	1805	1,840	1805	1,840	\$ -
Each Add. Invention Examined	1810	790	2810	395	\$ -
Expedited Examination (Design)	1802	900	1802	900	\$ -
Unintentionally Delayed Priority Claim	1453	1,370	1453	1,370	\$ -
Certificate of Correction	1811	100	1811	100	\$ -
Maintenance Fees 3.5 years	1551	900	2551	450	\$ -
Maintenance Fees 7.5 years	1552	2,300	2552	1,150	\$ -
Maintenance Fees 11.5 years	1553	3,800	2553	1,900	\$ -
Surcharge - Late Payment 6 mos.	1554	130	2554	65	\$ -
Other fee					\$ -

Additional Fee Subtotal

\$ -

METHOD OF PAYMENT (Check all that apply)

☒ Credit Card (Provide credit card information and authorization on PTO-2038)

☒ Deposit Account No.

10-0233-COCH-0149-US1

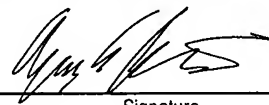
For the above-identified deposit account, the Director is hereby authorized to:

☐ To charge the above-identified fee.

☒ To charge any additional fees which may be required under 37 CFR 1.16, 1.17, 1.18, 1.20 and 1.492 or credit any overpayment to the deposit account number listed above.

Submitted by:

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Signature

May 26, 2005

Date